PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

111578520

| | | CLAIMS A | SMALL ENTITY TYPE | | OR | OTHER THAN OR SMALL ENTITY | | | | | |
|--|--|---|--|-------------------------------|--|-----------------------------|--------------|------------------------|----|----------------------------|------------------------|
| U.S. NATIONAL STAGE FEES | | | <u> </u> | | | | RATE | FEE | | RATE | FEE |
| BASIC FEE | | | SMALL ENT | ·. = \$ 150 | LARGE ENT. = \$ 300 | | BASIC FEE | \$150 | OR | BASIC FEE | \$300 |
| EXAMINATION FEE | | | Satisfies PCT A | | All other situations = \$ 100 / \$ 200 | | EXAM. FEE | | | EXAM. FEE | 400 |
| SEARCH FEE | | | U.S. is ISA = \$50 / \$100 ALL other countries = \$200 / \$400 | | ALL other situations = \$ 250 / \$ 500 | | SEARCH FEE | | | SEARCH FEE | 200 |
| FEE FOR EXTRA SPEC. PGS. | | | minus 100 = | | / 50 = | | X \$ 125 = | | | X \$ 250 = | |
| ΤΟΤ | AL CHARGEAB | LE CLAIMS | 55m | inus 20 = | * 35 | | X \$ 25 = | | OR | X \$ 50 = | 1250 |
| INDEPENDENT CLAIMS | | | 1 - | ninus 3 = | * | | X \$ 100 = | · | OR | X \$ 200 = | |
| MUL | TIPLE DEPEND | DENT CLAIM PRE | ESENT | | • | | + \$ 180 = | | OR | + \$ 360 = | |
| * If | the difference | in column 1 is | less than zer | ss than zero, enter "0" in co | | | TOTAL | | OR | TOTAL | 2650 |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | SMALL ENTITY | | OR | OTHER THAN SMALL ENTITY | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | NUM PREVI | HEST IBER OUSLY FOR | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | * | Minus | *** | | = | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| | | | | | | | TOTAL ADDIT. | | OR | TOTAL ADDIT. FEE | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | NUM PREVI | HEST MBER OUSLY FOR | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | * | Minus | *** | | = | X \$ 100 = | | OR | X \$ 200 = | |
| ` | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | | | | | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". | | | | | | | | | | | |

^{***} If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.